

GIC Health Plan Rates
MONTHLY RATES AS OF JULY 1, 2017
FOR THE CITY OF NORTHAMPTON ENROLLEES
INCLUDING THE 0.35% ADMINISTRATIVE FEE

Active Employees, Retirees and Survivors without Medicare
Chart shows Employee's Portion on a monthly basis (taken in bi-weekly amts)

HEALTH PLAN	PLAN TYPE	% paid by employee	Individual Coverage	Family Coverage
Fallon Health Direct Care	HMO	20%	110.93	266.24
Fallon Health Select Care (Closed to New Members)	HMO	20%	147.41	353.78
Harvard Pilgrim Independence Plan (Closed to New Members)	PPO	50%	412.12	1005.55
Harvard Pilgrim Primary Choice Plan	HMO	20%	124.14	302.91
Health New England	HMO	20%	109.63	271.80
NHP Care (Neighborhood Health Plan)	HMO	20%	110.81	293.64
Tufts Health Plan Navigator (Closed to New Members)	PPO	50%	364.42	889.21
Tufts Health Plan Spirit	HMO-type	20%	110.65	266.38
UniCare State Indemnity Plan/Basic with CIC (Comprehensive)	Indemnity	50%	519.40	1215.27
UniCare State Indemnity Plan/Basic without CIC (Non-Comprehensive)	Indemnity	50%	495.90	1160.76
UniCare State Indemnity Plan/Community Choice	PPO-type	50%	260.30	624.73
UniCare State Indemnity Plan/PLUS	PPO-type	50%	346.60	828.07

Retirees and Survivors with Medicare

HEALTH PLAN	PLAN TYPE	% paid by enrollee	Retiree/Survivor Pays Per Person Individual Coverage
Fallon Senior Plan*	Medicare (HMO)	20%	67.23
Harvard Pilgrim Medicare Enhance	Medicare (Indemnity)	50%	211.53
Health New England MedPlus	Medicare (HMO)	20%	78.97
Tufts Health Plan Medicare Complement	Medicare (HMO)	20%	76.45
Tufts Health Plan Medicare Preferred*	Medicare (HMO)	20%	60.21
UniCare State Indemnity Plan/Medicare Extension (OME) with CIC (Comprehensive)	Medicare (Indemnity)	50%	190.32
UniCare State Indemnity Plan/Medicare Extension (OME) without CIC (Non-Comprehensive)	Medicare (Indemnity)	50%	184.96

**Benefits and rates of Fallon Senior Plan and Tufts Health Plan Medicare Preferred are subject to federal approval and may change on January 1, 2018.*

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